**NCLEX Stroke Questions Answer Key:**

1. While conducting a home care visit, the health care provider notes that the patient suddenly has trouble finding her words and is unable to move her left arm. Prioritize these interventions by numbering them.

2 Call 911

4\_\_\_Assess motor function

3 Assess vital signs

1 Assist patient to lie down

5\_\_\_Provide Reassurance

Hint #1 Normally assessments come before interventions, except in some emergency situations. Decide whether it is most important to assess or act first.

Hint #2 Think of safety first. Which of these interventions reduces the risk of injury?

Hint #3 Assist the patient to lie down first as progression of the damage related to the stroke can cause the patient to lose consciousness and fall. Then immediately call 911. When help is on the way, you can proceed with assessing vitals and motor function. It is also important to provide reassurance, but the other interventions should be prioritized.

2. The family of a patient who is being discharged after a hemorrhagic stroke has been given instructions about what to do if their family member develops warning signs of a stroke. Which statement indicates that further teaching is needed? Select all that apply.

Select all that apply.

1. I should take my family member to the emergency room immediately.

2. I should write down the time my family member develops symptoms.

3. I should call 911 right away.

4. I will give them 1 baby aspirin immediately.

5. I should encourage everyone to stay calm

Hint #1 Select the incorrect statements about how the family should respond to stroke symptoms.

Hint #2 Recording the time that symptoms occur is an important, yet often overlooked intervention as it helps determine the course of treatment.

Hint #3 Aspirin should not be given as it is impossible to rule out hemorrhage before the patient is in the hospital. It is also always best to have patients transported to the hospital via ambulance as supportive measures can be provided if the patient’s condition deteriorates.

3. A patient with a recent history of stroke is being discharge to home. Which instructions should be included in discharge education? Select all that apply.

1. Make sure to take your medication as prescribed.

2. Seek help immediately if you have sudden weakness, changes in vision, or altered level of consciousness.

3. Make sure to attend all follow-up visits as scheduled.

4. Consider participating in physical and/or occupational therapy programs.

5. Eat a diet low in saturated fat and high in sodium.

Hint #1 Select the choices that provide correct discharge instructions for this type of patient.

Hint #2 Determine if both parts of the “and” statement are correct.

Hint #3 Patients should be encouraged to attend follow up visits, to participate in rehabilitation programs, take their medications as prescribed, and seek help if they develop warning signs of stroke.

4. Which of the following interventions should be implemented for a patient immediately following recombinant tissue plasminogen activator (tPA) therapy? Select all that apply.

1. Monitor vital signs and heart rhythm

2. Monitor blood glucose levels

3. Assess neurological function hourly

4. Provide patient education on plan of care

5. Administer aspirin

Hint #1 Think of the purpose of tPA therapy and the possible complications resulting from it.

Hint #2What assessments would alert you if there were complications from the tPA therapy?

Hint #3 After tPA, vital signs, neurological function, and blood sugar should be monitored. The patient should also be educated on the plan of care. Aspirin should not be administered until 24 to 48 hours after tPA if at all as it can cause bleeding.

5. The healthcare provider is reviewing the International Normalized Ratio (INR) results of a patient with a history of embolic stroke. Which of the following indicates a therapeutic value for this patient?

Please choose from one of the following options.

1. 1.5

2. 4.1

3. 0.5

4. 2.5

Hint #1 Think about the pathophysiology of a embolic stroke and how this would impact the desired level of anticoagulation.

Hint #2 Therapeutic INR levels are typically preferred to be slightly higher than normal limits. An INR of 0.50 is typically not considered therapeutic.

Hint #3 A general rule of thumb is for INR to be between 2.0 and 3.0 in someone who is receiving anticoagulation therapy. The other values would indicate increased risk of embolism, clot, or bleeding.

6. The healthcare provider is reviewing the International Normalized Ratio (INR) results of a patient with a history of embolic stroke. Which of the following indicates a therapeutic value for this patient?

1. 1.5

2. 2.5

3. 4.1

4. 0.5

Hint #1 Think about the pathophysiology of a embolic stroke and how this would impact the desired level of anticoagulation.

Hint #2 Therapeutic INR levels are typically preferred to be slightly higher than normal limits. An INR of 0.50 is typically not considered therapeutic.

Hint #3 A general rule of thumb is for INR to be between 2.0 to 3.0 in someone who is receiving anticoagulation therapy. The other values would indicate increased risk of embolism, clot, or bleeding.

7. The health care provider is assessing a patient who is recovering from a stroke. Which of these problems should receive priority for this patient?

Please choose from one of the following options.

1. Impaired mobility.

2. Risk for altered coping.

3. Risk for aspiration.

4. Impaired communication.

Hint #1 Stroke can affect people differently in varying degrees. Think of the most important problem to rule out before other aspects of recovery can be considered.

Hint #2 Generally, “risk for” problems are not addressed before actual problems unless the risks of not addressing them immediately could be potentially deadly.

Hint #3 Risk for aspiration should always be considered as early as possible because some patients might have difficulty clearing their own salivary secretions. Aspiration of saliva and or other liquids can lead to pneumonia, which can be a fatal complication of stroke.

8. When caring for a patient diagnosed with ischemic stroke, which of these is the priority interventions when administering tissue plasminogen activator therapy (tPA)?

Please choose from one of the following options.

Assess patient’s motor function to compare to baseline.

Assess patient for recent history of bleeding or trauma.

Explain the purpose of tPA therapy to the patient and family.

Educate the patient and family on stroke recovery.

Hint #1 Think about the purpose of tPA therapy. Which of these interventions is most important to consider before the therapy?

Hint #2 This question is really asking you to make sure tPA therapy is safe for this patient.

Hint #3 Patients must meet certain criteria for tPA therapy. It is important to identify if the patient has recently had any bleeding or trauma to ensure that they are not at risk for hemorrhage as a result of tPA therapy.

9. Which of these measures should be included in the plan of care to prevent complications in a patient who is recovering from a stroke?

Please choose from one of the following options.

1. Reposition every shift

2. Assess vital signs every two hours

3. Monitor cardiac rhythm

4. Conduct a swallow evaluation

Hint #1 All of these interventions are important for prevention of complications. Select the priority based on what you know about some of the most common and serious complications.

Hint #2 Use the ABCs of prioritization to exclude interventions of lower priority.

Hint #3 Assessing the patient’s ability to swallow protects the patient’s airway and prevents aspiration and pneumonia.

10. A patient who has experienced a stroke is being monitored during the acute management phase. The clinician notes that the patient’s intracranial pressure (ICP) is 30 mm Hg. Which of the following interventions should be taken first?

Please choose from one of the following options.

1. Raise the head of the bed to 30°

2. Assess level of consciousness.

3. Obtain Vital Signs.

4. Lay the patient flat.

Hint #1 In the acute management phase, stroke patients can develop increased intracranial pressure, which can complicate recovery and increase the risk of mortality. An ICP of over 20mm Hg requires immediate intervention.

Hint #2 Assessing level of consciousness and vital signs is important if a change in ICP is noted, but it is the not the priority intervention.

Hint #3 The head of the bed should be elevated to 30° to allow for an immediate decrease in ICP. Laying the patient flat would decrease venous drainage from the brain and contribute to increased ICP. Vital signs and other neurological assessments should be performed afterward and the provider should be notified.

11. A patient’s family has been given instructions about post-stroke rehabilitation. Which of these statements indicates that the family requires further instruction?

Please choose from one of the following options.

1. “My family member’s level of functioning might vary within the next couple of months.”

2. “I should ensure my family member adheres treatment regimen as prescribed.”

3. “I can expect my family member to become frustrated at times.”

4. “I should do everything for my family member around the house.”

Hint #1 Use the process of elimination to exclude correct statements about rehabilitation care.

Hint #2 Think of what you know about the challenges of autonomy after stroke. What is the role of family members in supporting patients through their recovery?

Hint #3 Family members should be encouraged to help as needed with activities of daily living, but should not plan to do everything for the patient.